

# BIDDERS DATA SHEET

Facility Information

06-X-38813

The bidder shall provide the following information

- 1) Indicate below if the facility is in compliance with the American Disabilities Act and/or the NJ Barrier Sub-code.

☒ American Disabilities Act ☐ NJ Barrier Sub code ☐ Both

2) Facility popular brand name: Trenton Marriott at Lafayette Yard

3) Street address: 1 West Lafayette Street  
Trenton, NJ 08608

4) Telephone number: 609-421-4000 Facsimile number: 609-656-4597

5) Federal Identification Number (FEIN #): \_\_\_\_\_

6) Name of person to contact for this contract: Samantha Johnson

7) Contact telephone number: 609-656-4506 Facsimile number: 609-656-4597

8) Contact email address (optional): Samantha.Johnson@marriott.com

9) Number of guest rooms for overnight lodging: 197

10) Regional location of the facility: ☐ Northern ☒ Central ☐ Southern

- 11) Provide the facility's confirmation and cancellation policy below or provide policy separately. Policy must be submitted with the bid proposal.

Business Travel Sleeping Rooms without  
a contract may be cancelled without penalty  
if cancelled by 4pm day of arrival.  
Business Travel Sleeping rooms must be  
confirmed with a credit card.

\* Group Meeting space AND sleeping rooms  
are subject to a cancellation Fee based on  
contract signed. \*\* See Attached contract  
shell for cancellation fees and terms \*\*\*  
Actual NAMES, DATES, RATES, AND FEES to be  
determined based on requestor's NEEDS, AND  
Filled in during the sales process \*\*

\*All areas in red to be filled in as per the requirements and needs of each individual program. Time dates and rates will vary



## GROUP SALES AGREEMENT

### DESCRIPTION OF GROUP AND EVENT

The following represents an agreement between: Marriott Trenton at Lafayette Yard, 1 West Lafayette Street, Trenton, NJ, 08608, (609) 421-4000 and ((ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) and outlines specific conditions and services to be provided.

ORGANIZATION: ((ACTUAL NAME OF GROUP TO BE FILLED IN HERE))  
CONTACT:

Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Country: USA  
Phone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

NAME OF EVENT: (To Be Determined)

OFFICIAL PROGRAM DATES: (To Be Determined)

ANTICIPATED ATTENDANCE: (# Based on Group)

**GUEST ROOM COMMITMENT** *(Must be included in the Group Sales Agreement for Groups who have determined a need for Guest Rooms as part of their function)*

The Hotel agrees that it will provide, and ((ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) agrees that it will be responsible for utilizing, (#\_\_\_\_ of rooms to be determined based on actual block requested to be filled in here) room nights in the pattern set forth below (such number and such pattern, the "Room Night Commitment"):

| Date | Day | Standard | Upgrade | Suite | Total Rooms |
|------|-----|----------|---------|-------|-------------|
| TBD  | TBD | TBD      | TBD     | TBD   | TBD         |

| Start Date | End Date | Room Type | Single                                | Double                                |
|------------|----------|-----------|---------------------------------------|---------------------------------------|
| TBD        | TBD      | Standard  | Room Rate to be filled in here \$\$\$ | Room Rate to be filled in here \$\$\$ |

### GROUP ROOM RATES

Hotel's corporate rates for 2006 are as follows:

Single: \$194  
Double: \$194  
Suites: \$225 - \$325

\*All areas in red to be filled in as per the requirements and needs of each individual program. Time dates and rates will vary

Based upon ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE))'s total program requirements as outlined in this agreement, Hotel confirms the following group rates (net of all taxes):

|         |                                |
|---------|--------------------------------|
| Single: | \$ (Rate to be filled in here) |
| Double: | \$ (Rate to be filled in here) |
| Suites: | \$ (Rate to be filled in here) |

Hotel room rates are subject to applicable state and local taxes (currently 14%) in effect at the time of check in.

### **COMMISSION**

The group room rates listed above are net non-commissionable. ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) will advise its designated agency(ies) of these rates and address any resulting agency compensation issues directly with the management of the appropriate agency.

### **METHOD OF RESERVATIONS**

Reservations for the Event will be made by ( TBD by Group contact....Choose either Rooming List or Individual Call-In)

### **GUARANTEED RESERVATIONS**

All reservations will be guaranteed by ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) or by Individual Credit Cards.

### **CUT-OFF DATE**

Reservations by attendees must be received on or before (#### Actual Date to be filled in here as determined by Hotel, approximately 3 weeks prior to arrival date), (the "Cut-Off Date"). At the Cut-Off Date, Hotel will review the reservation pick up for the Event, release the unreserved rooms for general sale, and determine whether or not it can accept reservations based on a space- and rate-available basis at the ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) group rate after this date.

Release of rooms for general sale following the Cut-Off Date does not affect ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE))'s obligation, as discussed elsewhere in this Agreement, to utilize guest rooms.

### **BILLING ARRANGEMENTS**

The following billing arrangements apply: TBD (Room & Tax to Master or Individual to Pay all Charges)

**FUNCTION INFORMATION AGENDA/EVENT AGENDA** (Must be included for Groups who have determined a need for Meeting Rooms/Food and Beverage Functions as part of their event.)

Based on the requirements outlined by ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)), the Hotel has reserved the function space set forth on the below Function Information Agenda/Event Agenda.

\*\*\*\*\* (Actual Agenda to be filled in below based on needs of each group) \*\*\*\*\*

| Date | Day | Start Time | End Time | Function Type | Setup | # People | Rental | Related Events |
|------|-----|------------|----------|---------------|-------|----------|--------|----------------|
|      |     |            |          |               |       |          |        |                |
|      |     |            |          |               |       |          |        |                |
|      |     |            |          |               |       |          |        |                |

\*All areas in red to be filled in as per the requirements and needs of each individual program. Time dates and rates will vary

### **CURRENT CATERING MINIMUM RATES**

Hotel's 2006 minimum catering prices are as follows (*Minimum pricing is depicted below. Actual pricing dependent upon menu items chosen*):

|                        |                             |
|------------------------|-----------------------------|
| Continental Breakfast: | \$11.75 per person          |
| Lunch Buffet:          | \$24.25 per person          |
| Lunch Plated:          | \$24.75 per person          |
| Dinner Buffet:         | \$39.00 per person          |
| Dinner Plated/3 Course | \$36.75 per person          |
| Dinner Plated/4 Course | \$44.75 per person          |
| Cocktail Reception:    | \$25.00 per person per hour |

These quotations do not include any applicable NJ tax (currently at 6%), and a taxable service charge of 20%. All food and beverage served in the Hotel must be purchased from the Hotel.

### **ATTENDANCE GUARANTEE FOR FOOD AND BEVERAGE FUNCTIONS**

The final Guarantee of Attendance is due by three (3) business days prior to date of event by 12:00pm. (Final guarantee can only be reduced by a maximum 20% of original guarantee without penalty). This Guarantee is not subject to reduction. Hotel will set the room and prepare food for 5% over the Guarantee. (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)'s final bill will be based on the actual Attendance or the Guarantee, whichever is greater.

**FOOD AND BEVERAGE ATTRITION/CANCELLATION** (This clause only needs to be included with groups that are catering only)

ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) agrees to provide a minimum food and beverage revenue of (\$\$.##\_\_\_\_\_ to be filled in based on groups estimated food and beverage revenue totals as determined by Hotel and based on above Catering Minimums or Group Contact's choice of menu) (exclusive of applicable service charges and taxes) for this event. If any such function is cancelled or there is a reduction of more than 20% in the listed number of covers, NJEA agrees to pay Hotel within thirty (30) days, as follows:

1. Function is cancelled with advance notice of 72 hours or more: 65% of the food and beverage revenue that the hotel reasonably estimates (based on the then-current minimum catering prices and listed number of covers) that it would have received for such function but for cancellation (the "Hotel Revenue Estimate").
2. Function is cancelled with advance notice of less than 72 hours: 100% of the Hotel Revenue Estimate for such function.
3. Function attendance is reduced with advance notice of 72 hours or more: 80% of the difference between the Hotel Revenue Estimate for such function and the actual revenue received for such function.
4. Function attendance is reduced with advance notice of less than 72 hours: 100% of the difference between the Hotel Revenue Estimate for such function and the actual revenue received for such function.

Hotel agrees that after receipt of this amount, it will not seek further damages resulting from the cancellation or attrition of such catered functions.

### **MASTER ACCOUNT**

Hotel must be notified in writing at least 10 days prior to arrival of the authorized signatories and the charges that are to be posted to the Master Account. Any cancellation or attrition fees will be billed to the Master Account.

\*All areas in red to be filled in as per the requirements and needs of each individual program. Time dates and rates will vary

#### METHOD OF PAYMENT

The method of payment of the Master Account will be established upon approval of ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE))'s credit.

In the event that credit is not approved, ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) agrees to pay an advance deposit in an amount to be determined by the Hotel in its reasonable discretion.

The outstanding balance of the ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE))'s Master Account (exclusive of disputed charges) will be due and payable upon receipt of invoice. ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) will raise any disputed charge(s) *within* 15 days after receipt of the invoice. The Hotel will work with ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) in resolving any such disputed charges, the payment of which will be due upon receipt of invoice after resolution of the dispute. If payment of any invoice is not received within thirty (30) days of the date on which it was due, Hotel will impose a finance charge at the rate of the lesser of 1-1/2% per month (18% annual rate) or the maximum allowed by law on the unpaid balance commencing on the invoice date.

#### DAMAGE TO FUNCTION SPACE

( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) agrees to pay for any damage to function space that occurs, provided ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) is at fault.

#### TAX EXEMPT STATUS

If ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) maintains tax exempt status, proof must be provided to Hotel with an official ST-5 valid tax exemption certificate(s).

#### ADVANCE DEPOSIT AND/OR PURCHASE ORDER

An advance deposit in the amount of \$500.00 is requested in addition to your signed contract. This advance deposit will be credited toward the Master Account. A copy or photo copy of original purchase order is also requested with signed contract.

#### OUTSIDE FOOD AND BEVERAGE POLICY

All food and beverages served at functions associated with the Event must be provided, prepared, and served by Hotel, and must be consumed on Hotel premises.

#### PAYMENT BY CREDIT CARD OR COMPANY CHECK

If ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) wishes to pay any portion of its obligation by credit card or company check, the below form must be filled out prior to execution of this Agreement.

|  |       |
|--|-------|
| <i>Credit Card Number:</i>             | _____ |
| <i>Expiration Date:</i>                | _____ |
| <i>Name as it Appears on the Card:</i> | _____ |
| <i>Billing Address for Card:</i>       | _____ |
|  | _____ |
| <i>Signature of Card Holder:</i>       | _____ |

The above form must also be filled in if direct billing has not been approved and the Master Account charges will be paid by credit card or company check.



\*All areas in red to be filled in as per the requirements and needs of each individual program. Time dates and rates will vary

### **MITIGATION OF DAMAGES**

The parties agree that notwithstanding anything in this Agreement to the contrary, in the event that ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) cancels its event under this Agreement, the Hotel shall be under the duty to mitigate its losses, and any sums due under this Agreement shall be reduced by any successful mitigation by Hotel and also to the extent that Hotel fails to reasonably mitigate its losses.

In addition, nothing in this provision shall limit or modify the release of all obligations applicable if failure of performance or cancellation by ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) is under the Act of God clause of this Agreement.

### **CANCELLATION (This clause applies for group with sleeping rooms and catering)**

( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) acknowledges that if it cancels or otherwise essentially abandons its planned use of the Room Night Commitment (a "Cancellation"), this action would constitute a breach of ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE))'s obligation to Hotel and Hotel would be harmed. Because Hotel's harm (and ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE))'s obligation to compensate Hotel for that harm) is likely to increase if there is a delay in notifying Hotel of any Cancellation, ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) agrees to notify Hotel, in writing, within five (5) business days of any decision to Cancel. In addition, if a Cancellation occurs, the parties agree that:

- (a) It would be difficult to determine Hotel's actual harm.
- (b) Due to the short period of time between the execution of this Agreement and the Event dates, and/or the projected non-capacity occupancy of the Hotel over the Event dates, Hotel is unlikely to be able to resell rooms or function space on a "last-sale" basis in the event of a Cancellation.
- (c) The amount set forth below reasonably estimates Hotel's harm for a Cancellation.

( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) therefore agrees to pay Hotel, within thirty (30) days after any Cancellation, as liquidated damages and not as a penalty. The amounts below set in a sliding scale. Provided that ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) timely notifies Hotel of the Cancellation and timely pays the above liquidated damages, Hotel agrees not to seek additional damages from ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) relating to the Cancellation.

*If event is cancelled on or before 121 business days prior to arrival, cancellation will be 50% of total estimated revenue.*

*If event is cancelled on or before 90 -120 business days prior to arrival, cancellation will be 75% of total estimated revenue.*

*If event is cancelled on or before 89-0 business days prior to arrival cancellation will be 100% of total estimated revenue.*

***\*\*Total Estimated Revenue consists of Sleeping & Meeting Rooms Revenue and Estimated Food and Beverage Revenue\****

### **ACT OF GOD**

Neither party shall be responsible for failure of performance due to fire, earthquake, flood, weather conditions which make travel inadvisable, explosion, strikes, war, Terrorism, or Acts of God, labor disputes, governmental authority, or accidents. In addition, if either party must cancel or cannot perform for any of the reasons set forth in this paragraph, both parties shall be released of all obligations under this agreement, financial or otherwise, and ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) shall receive a complete refund of all monies paid.

\*All areas in red to be filled in as per the requirements and needs of each individual program. Time dates and rates will vary

### **PARKING FEES**

Parking in the garage adjacent to the hotel is additional and chargeable to the individual attendee or the ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)). Fees are as follows:

|  |                     |
|--|---------------------|
| Overnight Parking (Guests staying in the hotel): | \$12.00 per vehicle |
| Banquet Events (self-park):                      | \$ 5.00 per vehicle |

The Parking Garage is owned and operated by the Trenton Parking Authority. The Parking Garage is not hotel property. The Hotel is NOT permitted to validate complimentary parking for the parking garage.

### **CHANGES, ADDITIONS, STIPULATIONS, OR LINING OUT**

Any changes, additions, stipulations or deletions including corrective lining out by either Hotel or ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) will not be considered agreed to or binding on the other unless such modifications have been initialed or otherwise approved in writing by the other.

### **LITIGATION EXPENSES**

The parties agree that, in the event litigation relating to this Agreement is filed by either party, the non-prevailing party in such litigation will pay the prevailing party's costs resulting from the litigation, including reasonable attorneys' fees.

### **LIQUOR LICENSE**

(( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE))) understands that Hotel's liquor license requires that beverages only be dispensed by Hotel employees or bartenders. Alcoholic beverage service may be denied to those guests who appear to be intoxicated or are under age.

### **IN-HOUSE EQUIPMENT**

Hotel will provide, at no charge, a reasonable amount of meeting equipment (for example, chairs, tables, chalkboards, etc). These complimentary arrangements do not include special setups or extraordinary formats that would deplete Hotel's present in-house equipment to the point of requiring rental of an additional supply to accommodate ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE))'s needs. If such special setups or extraordinary formats are requested, Hotel will present ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) two (2) alternatives: (1) charging ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) the rental cost for additional equipment, or (2) changing the extraordinary setup to a standard format, avoiding the additional cost.

### **UNATTENDED ITEMS/ADDITIONAL SECURITY**

The Hotel cannot ensure the security of items left unattended in function rooms. Special arrangements may be made with the Hotel for securing a limited number of valuable items. If ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) requires additional security with respect to such items or for any other reason, the Hotel will assist in making these arrangements. All security personnel to be utilized during the Event are subject to Hotel approval.

### **USE OF OUTSIDE VENDORS**

If ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) wishes to hire outside vendors to provide any goods or services at Hotel during the Event, Hotel may, in its sole discretion, require that such vendor provide Hotel, in form and amount reasonably satisfactory to Hotel, an indemnification agreement and proof of adequate insurance.

### **PERFORMANCE LICENSES**

(( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE))) will be solely responsible for obtaining any necessary licenses or permission to perform, broadcast, transmit, or display any copyrighted works (including without limitation, music, audio, or video recordings, art, etc.) that ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) may use or request to be used at the Hotel.

\*All areas in red to be filled in as per the requirements and needs of each individual program. Time dates and rates will vary

### ACCEPTANCE

Prior to execution by both parties, this document represents an offer by the Hotel. Unless the Hotel otherwise notifies ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) at any time prior to ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE))'s execution of this document, the outlined format and dates will be held by the Hotel for ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) on a first-option basis until (\_\_\_\_ACTUAL DUE DATE HERE, AS DETERMINED BY HOTEL) (approximately two weeks after date Group Sales Agreement is sent to Group contact). If ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) cannot make a commitment prior to that date, the offer will revert to a second option basis or, at the Hotel's option, the arrangements will be released, in which case neither party will have any further obligations. Upon receipt by Hotel of a fully executed version of this Agreement prior to (\_\_\_\_ACTUAL DUE DATE HERE, AS DETERMINED BY HOTEL) (approximately two weeks after date Group Sales Agreement is sent to Group contact), or upon Hotel's acceptance of a fully executed version of this Agreement after such date, it will be placed on a definite basis and will be binding upon Hotel and ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)).

Hotel and ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)) have agreed to and have executed this Agreement by their authorized representatives as of the dates indicated below.

### SIGNATURES

Approved and authorized by ( (ACTUAL NAME OF GROUP TO BE FILLED IN HERE)).

Name: (Print) \_\_\_\_\_

Title: (Print) \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Approved and authorized by Hotel:

Name: (Print) \_\_\_\_\_

Title: (Print) Sales Manager \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Phone: 609-656-4506 / Fax: 609-656-4597



12) Provide the procedures for requesting special dietary meals:

\* Request must be made in writing to contacts Event Manager after a contract is signed and space is secured. Special Menus can also be created during the sales process.

#### AUDIO, VIDEO INFORMATION

1) Does your facility have an exclusive arrangement with an outside audiovisual contractor/equipment provider

☐ Yes

☒ No

If yes the following information shall be provided:

Name of audiovisual supplier:

N/A

Address of supplier:

Supplier's Federal Identification Number (FEIN):

Suppliers telephone Number:

Facsimile Number:

Name of supplier's contact person:

The bidder shall provide with the bid proposal all pricing for audiovisual services. These prices shall be firm through the term of the contract. If no prices for audiovisual services are submitted with the bid proposal and is offered to the State it will be at no cost to the State.

\* See Attached Audio Video Pricing.



## EVENT TECHNOLOGY EQUIPMENT PACKAGES

### LCD PROJECTION

|   |   |
|---|---|
| Standard LCD Projector,<br>XGA True Resolution..... | \$450.00                                    |
| Cart Package.....                                   | \$35.00<br>(includes powerstrip & ext.cord) |

### VIDEO PROJECTION

#### WAYPORT HI SPEED INTERNET ACCESS

|                                |          |
|--------------------------------|----------|
| Ibahn HSIA Connection.....     | \$400.00 |
| D-Link Switch 8 Port .....     | \$75.00  |
| HP Procure Switch 12 Port..... | \$85.00  |

#### A/V

|                        |          |
|------------------------|----------|
| Accessory Package..... | \$150.00 |
|------------------------|----------|

A/V package includes a projection cart, extension cords, and power strip(s).

### OVERHEAD PROJECTORS

|                                  |         |
|----------------------------------|---------|
| Overhead Projector Package ..... | \$90.00 |
|----------------------------------|---------|

Popular overhead projector package with super wide overhead projector featuring automatic spare lamp changer. All AC extension cords safely taped. Includes standard 7 ft. tripod screen. Large meeting rooms would require a larger screen at an additional cost.

#### RECOMMENDED BY

Complete speaker freedom with:

|                                 |          |
|---------------------------------|----------|
| Laser Pointer.....              | \$45.00  |
| Wireless Microphone .....       | \$125.00 |
| VGA 25 ft. Extension Cable..... | \$25.00  |
| Wireless Remote Mouse.....      | \$65.00  |

#### SPECIAL PIPE & DRAPE PACKAGES

|                           |                  |
|---------------------------|------------------|
| Pipe & Drape (black)..... | \$10.00 per F t. |
|---------------------------|------------------|

### VIDEO VCR/MONITOR

DVD Player or VHS 1/2" package features a roll-around 54" projection cart, a 27" full-function color video monitor/receiver. All cable connections. AC extension cords safely taped.

|                 |          |
|-----------------|----------|
| VHS 1/2".....   | \$175.00 |
| DVD Player..... | \$175.00 |

#### Camcorder

|                          |       |
|--------------------------|-------|
| Camcorder w/ Tripod..... | \$200 |
|--------------------------|-------|

#### RECOMMENDED BY

PROFESSIONAL MEETING PLANNERS:

#### SPECIAL LIGHTING PACKAGES

|                                |          |
|--------------------------------|----------|
| Podium Lighting Package.....   | \$100.00 |
| Light Tree with 2 light units. |          |

## EVENT TECHNOLOGY EQUIPMENT A LA CARTE

### SPEAKERS

|                             |          |
|-----------------------------|----------|
| JBL Speakers.....           | \$125.00 |
| House System Patch Fee..... | \$60.00  |

### MEETING ACCESSORIES

|                                    |          |
|------------------------------------|----------|
| Standing Podium.....               | \$40.00  |
| With/ Light and Microphone         |          |
| Laptop.....                        | \$200.00 |
| Laser Pointer.....                 | \$45.00  |
| Flipchart Rental with Markers..... | \$30.00  |
| White Board .....                  | \$30.00  |
| Conference/Speaker Phone.....      | \$150.00 |
| Speaker Phone.....                 | \$25.00  |
| Projector Carts and Stands.....    | \$20.00  |
| Spotlight .....                    | \$25.00  |

### MICROPHONES

|                                 |          |
|---------------------------------|----------|
| Microphones, wired .....        | \$40.00  |
| Wireless Mic (hand or lav)..... | \$125.00 |
| 4 Channel Mixer.....            | \$60.00  |
| 6 channel Mixer.....            | \$80.00  |
| 12 Channel Mixer.....           | \$150.00 |
| 16 Channel Mixer.....           | \$180.00 |

### SCREENS

|  |          |
|--|----------|
| 5' X 5' Tripod .....                   | \$30.00  |
| 6' X 6' Tripod .....                   | \$40.00  |
| 8' X 8' Tripod .....                   | \$50.00  |
| 10' X 10' Cradle .....                 | \$100.00 |
| 9' x 12' Fast Fold with Drape kit..... | \$250.00 |

### AUDIO EQUIPMENT

|                                  |         |
|----------------------------------|---------|
| Stereo Cassette Player/Rec ..... | \$60.00 |
| CD Player .....                  | \$60.00 |
| Boom Box with CD Player.....     | \$50.00 |

### LABOR

Technician Rate (minimum 4 hours):

|                                  |              |
|----------------------------------|--------------|
| Monday-Friday (day rate) .....   | \$50.00 Hour |
| Monday-Friday (night rate).....  | \$50.00 Hour |
| Saturday, Sunday & Holidays .... | \$75.00 Hour |

Prices are based on usage with a Marriott projector. Customers who provide their own projector will be required to pay an additional \$150 set up fee.

A 20% Service Setup Fee and 6% Sales Tax will be added to all audio-visual equipment rentals.

**PRICING AND SUPPORTING DETAILS TO BE COMPLETED BY THE BIDDER**

**CONFERENCE, BANQUET, AND HOTEL FACILITY RENTAL**

Bid Number 06-X-38813

**Food Services Charges**

Refer to RFP Section 3.0 (Scope of Work) for requirements. The bidder shall provide the following food services charges:

| Descriptions                                      | Hours of Operation | Year 1<br>2006                           | Year 2<br>2007                           |
|---|--------------------|--|--|
| Continental Breakfast                             | 6am-11am           | \$ 12.00                                 | \$ 12.50                                 |
| Plated Breakfast                                  | 6am-11am           | \$ 16 <sup>.50</sup> - 18 <sup>.25</sup> | \$ 16 <sup>.50</sup> - 18 <sup>.25</sup> |
| Buffet Breakfast                                  | 6am-11am           | \$ 21.00                                 | \$ 21.00                                 |
| AM Break  | 6am-11am           | \$ 9.00                                  | \$ 9.50                                  |
| Plated Lunch                                      | 11am-2pm           | \$ 24 <sup>.75</sup> - 35 <sup>.50</sup> | \$ 24 <sup>.75</sup> - 35 <sup>.50</sup> |
| Buffet Lunch                                      | 11am-2pm           | \$ 24 <sup>.25</sup> - 30 <sup>.00</sup> | \$ 24 <sup>.25</sup> - 30 <sup>.00</sup> |
| Box Lunch   | 11am-2pm           | \$ 19.50                                 | \$ 20.50                                 |
| PM Break  | 11am-4pm           | \$ 14.00                                 | \$ 14.50                                 |
| Plated Dinner                                     | 3pm-10pm           | \$ 36 <sup>.75</sup> - 58 <sup>.50</sup> | \$ 36 <sup>.75</sup> - 58 <sup>.50</sup> |
| Buffet Dinner                                     | 3pm-10pm           | \$ 42 <sup>.00</sup> - 58 <sup>.00</sup> | \$ 42 <sup>.00</sup> - 58 <sup>.00</sup> |
| Snack Only  | 3pm-10pm           | \$ 25.00                                 | \$ 25.00                                 |
| Evening Reception <sup>without</sup><br>* ALCOHOL | 3pm-10pm           | \$ 25.00                                 | \$ 27.00                                 |
| Gratuity and/or services charge rate              | N/A                | 20 %                                     | 20 %                                     |

**Package Charge Rates**

The bidder may provide an alternate package pricing structure in the form of package rates. These charges, which are billed on a per person, per day basis are all inclusive of the following services required by the State for an event.

- ☒ Food (breakfast, AM break, lunch, PM break and dinner)
- ☐ Lodging
- ☒ Meeting rooms (all inclusive)
- ☐ Breakout rooms

If using the package price structure, the bidder must provide the following half day and full day per person package rate and the services charge (a.k.a. gratuity) rate must be enter below.

\* See attached for package pricing

**Marriott.**  
TRENTON  
LAFAYETTE YARD

**Meeting Planner Package**

*Pricing includes items listed: Room Rental, Audio/Visual, Pads, Pens & Water*

| <i>Package</i> | <i>Menu Options</i>   | <i>For Groups 10 &amp; Above</i> |
|----------------|---|----------------------------------|
| A              | Continental Breakfast, Mid-Morning Break, Lunch Buffet, Afternoon Break | \$78.00                          |
| B              | Continental Breakfast, Mid-Morning Break, Lunch Buffet                  | \$69.00                          |
| C              | Continental Breakfast, Mid-Morning Break, Afternoon Break               | \$52.00                          |
| D              | Continental Breakfast, Mid-Morning Break                                | \$43.00                          |
| E              | Continental Breakfast   | \$37.00                          |
| F              | Lunch Buffet & Afternoon Break  | \$48.00                          |

**Continental Breakfast**

*Freshly Squeezed Orange Juice & Chilled Fruit Juices, Platters of Seasonal Fruit & Berries  
Basket of Breakfast Breads, Danish Pastry, & Fruit Muffins, Croissants, Assorted Bagels with Cream Cheese, Butter,  
Margarine, Preserves, & Honey, A Variety of Cold Cereals,  
Yogurt & Granola Parfaits Served in Martini Glasses.  
100% Colombian Coffee, Brewed Decaffeinated Coffee with International Flavored Syrups, & a Selection of Herbal Teas*

**Morning Coffee Refresh**

*100% Colombian Coffee, Brewed Decaffeinated Coffee with International Flavored Syrups, & a Selection of Herbal Teas*

**Buffet Lunch**

*Savory Soup,  
Tossed Garden Salad & Fresh Caesar Salad Served in a Parmesan Basket  
Gourmet Cold Salad Selections,  
Fresh Sliced Boar's Head Meats and Cheeses, Novel Breads and Rolls, with an Array of Condiments,  
Oven Roasted Turkey and Thinly Sliced Pastrami Served Hot on a Cast Iron Grill,  
Chef's Daily Featured Hot Entrée, Fresh Vegetables, a Prepared Potato or Grain,  
Lite and Delicious Desserts.*

*Includes: 100% Colombian Coffee, Decaffeinated Coffee with International Flavored Syrups, Selection of Herbal Teas  
Assorted Soft Drinks & Mineral Waters*

**Afternoon Break**

*Fresh Assortment of Homemade Cookie or Pastries, Assorted Granola & Nutritional Bars, Fresh Whole Fruit  
Assorted Soft Drinks & Mineral Waters & Energy Drinks  
100% Colombian Coffee, Brewed Decaffeinated Coffee with International Flavored Syrups, & a Selection of Herbal Teas*

**Audio/Visual**

- (1) Screen
- (2) Flipcharts with Markers

**Prices Do Not Include 20.5% Service Charge & New Jersey State Sales Tax of 6%**

*Revised April 2006*

**\*\* See Attached \*\***

| Package Charge Rates                 | Year 1   | Year 2           |
|--------------------------------------|----------|------------------|
| Half day package rates               | \$ 69 pp | \$ 69 per person |
| Full day package rates               | \$ 78 pp | \$ 78 per person |
| Gratuity and/or services charge rate | 20 %     | 20 %             |

### Half Day Meeting Room Rates

The bidder shall provide the required information for the following half day meeting room rates. The bidder may attach this information but it must be indicate in the following.

\* Main Ballroom - See Attached for Conference Rooms

| Seating Style   | Room Name          | Seating Capacity | Year 1   | Year 2   |
|-----------------|--------------------|------------------|----------|----------|
| Banquet         | Lafayette Ballroom | 400              | \$ 3,600 | \$ 4,000 |
| Classroom       |                    | 300              | \$ 3,600 | \$ 4,000 |
| Crescent Rounds |                    | 200              | \$ 3,600 | \$ 4,000 |
| Conference      |                    | -                | \$ 3,600 | \$ 4,000 |
| Theater         |                    | 600              | \$ 3,600 | \$ 4,000 |
| U-shape         |                    | -                | \$ 3,600 | \$ 4,000 |
| Other Reception |                    | 600              | \$ 3,600 | \$ 4,000 |

### Full Day Meet Room Rates

The bidder shall provide the following full day meeting room rates. The bidder may attach this information but it must be indicate in the following.

\* See Attached Rate Sheet.



| Seating Style   | Room Name          | Seating Capacity | Year 1   | Year 2    |
|-----------------|--------------------|------------------|----------|-----------|
| Banquet         | Lafayette Ballroom | 400              | \$ 6,800 | \$ 7,200- |
| Classroom       |                    | 300              | \$ 6,800 | \$ 7,200- |
| Crescent Rounds |                    | 200              | \$ 6,800 | \$ 7,200- |
| Conference      |                    | -                | \$ 6,800 | \$ 7,200- |
| Theater         |                    | 600              | \$ 6,800 | \$ 7,200- |
| U-shape         |                    | -                | \$ 6,800 | \$ 7,200- |
| Other           |                    | 600              | \$ 6,800 | \$ 7,200- |

### Breakout Room Rates

The bidder shall provide following breakout room rates. These rooms shall be separate from the meeting rooms.

The bidder may attach this information but it must be indicate in the following.

|   | Year 1    | Year 2    |
|---|-----------|-----------|
| Hamilton, Mercer, Ewing -<br>Half Day Breakout Room Rates | \$ 500.00 | \$ 550.00 |
| Hamilton, Mercer, Ewing<br>Full Day Breakout Room Rates   | \$ 800.00 | \$ 850.00 |

\* See Attached for smaller meeting / Board Rooms \*

### Exhibit Charges

The bidder shall provide exhibit charges below.

|                                | Year 1       | Year 2       |
|--------------------------------|--------------|--------------|
| Exhibit Table Space Rental     | \$ 10.00 per | \$ 12.00 per |
| Exhibit Table Electric Charges | \$ 40.00 per | \$ 50.00 per |

The bidder shall submit all pricing with the bid proposal by completing the price sheets or the bidder may attach all applicable price lists. If the bidders submit attached pricing information it shall meet all the requirements of the bid proposal.

1 West Lafayette Street  
Trenton, NJ 08608  
Phone: (609) 421-4000

From NJ Turnpike: Exit 7A to 195  
West to Trenton.

From I-95: Exit Rte. 29, follow signs to Trenton. Exit Memorial Drive. Turn left on to Fitch Way. Take first left onto S. Warren, one block. Left onto W. Lafayette Street. The hotel is on the left.

- 197 guest rooms, 4 suites
- 8 accessible rooms available
- Individual climate control
- Smoke detectors and sprinklers
- Work desk with ergonomic chair



- Two dual-line telephones with message light, voice mail and data port
- Remote-controlled cable TV with in-room pay movies
- AM/FM alarm clock radio
- Iron and ironing board
- Hair dryer
- In-room Coffee/Tea

- The Archives Restaurant, featuring delicious favorites (B,L,D)
- The Archives Bar, with large screen TV, offering cocktails and light snacks;

- Mercer County Park
- Washington Crossing State Park
- Tennis and golf nearby

- Parking garage
- Gift shop
- Notary public
- Safe-deposit boxes
- High-speed Internet access

- War Memorial Theatre
- State House, Capitol Complex
- NJ State Museum

- William Trent House
- Old Barracks Museum
- The Battle Monument
- Washington Crossing State Park
- Sovereign Bank Arena
- Waterfront Baseball

- A total of 14 meeting rooms with over 16,000 total square feet of meeting space
- 6,015-square-foot Grand Ballroom dividing into three sections
- 9,400 square feet of meeting space in the War Memorial
- 1,800-seat Amphitheater in the War Memorial
- Ergonomic chairs, individual lighting and climate controls
- Continuous refreshment stations

The floor plan of the Lafayette Ballroom is rectangular. At the top, there is a stage area labeled "LAFAYETTE BALLROOM". Below the stage, there are three main sections labeled "SALON A", "SALON B", and "SALON C" from left to right. Each salon has a central aisle and side aisles. The plan also shows several smaller rooms or alcoves along the walls, including a "RESTROOM" and a "DRESSING ROOM".



| MEETING ROOM       | DIMENSIONS |        | CAPACITIES |             |            |         |           |                  |
|--------------------|------------|--------|------------|-------------|------------|---------|-----------|------------------|
|                    | WxL        | SQ. FT | THEATER    | SCHOOL-ROOM | CONFERENCE | U-SHAPE | RECEPTION | BANQUET (RND/10) |
| Lafayette Ballroom | 63x94x14   | 6,015  | 600        | 300         | —          | —       | 600       | 400*             |
| Salon A            | 31x63x14   | 1,953  | 150        | 110         | —          | 45      | 300       | 140              |
| Salon B            | 32x63x14   | 2,016  | 150        | 110         | —          | 45      | 300       | 140              |
| Salon C            | 31x63x14   | 1,953  | 150        | 110         | —          | 45      | 300       | 140              |
| Mercer             | 31x35x14   | 1,085  | 100        | 40          | 30         | 35      | —         | 60               |
| Hamilton           | 26x31x14   | 806    | 60         | 30          | 20         | 20      | —         | 40               |
| Ewing              | 21x41x10   | 861    | 75         | 30          | 20         | 24      | —         | 40               |
| Cadwalader         | 16x22x10   | 352    | —          | —           | 12         | —       | —         | —                |
| Knox               | 16x22x10   | 352    | —          | —           | 12         | —       | —         | —                |
| Dickinson          | 14x22x10   | 308    | —          | —           | 12         | —       | —         | —                |
| Monroe             | 14x22x10   | 308    | —          | —           | 12         | —       | —         | —                |
| Stirling Boardroom | 22x32x10   | 704    | —          | —           | 14         | —       | —         | —                |

SC02161/20MPCA

# FUNCTION ROOM RENTAL PRICES

**HOTEL FUNCTION SPACE:**

YEAR (1) ONLY

| FUNCTION ROOM      | SQ FOOT | ALL DAY<br>7am - 5pm | HALF DAY<br>7am-12N | HALF DAY<br>1pm-5pm | EVENING<br>6pm-11pm |
|--------------------|---------|----------------------|---------------------|---------------------|---------------------|
| Grand Ballroom     | 6,015   | \$ 6,800             | \$ 3,600            | \$ 3,600            | \$ 2,500            |
| Salon A            | 1,953   | \$ 2,400             | \$ 1,500            | \$ 1,500            | \$ 800              |
| Salon B            | 2,016   | \$ 2,400             | \$ 1,500            | \$ 1,500            | \$ 800              |
| Salon C            | 1,953   | \$ 2,400             | \$ 1,500            | \$ 1,500            | \$ 800              |
| Mercer Room        | 1,085   | \$ 800               | \$ 500              | \$ 500              | \$ 300              |
| Hamilton Room      | 806     | \$ 600               | \$ 350              | \$ 350              | \$ 250              |
| Ewing Room         | 816     | \$ 600               | \$ 350              | \$ 350              | \$ 250              |
| Stirling Boardroom | 704     | \$ 500               | \$ 250              | \$ 250              | \$ 150              |
| Cadwalader Room    | 352     | \$ 250               | \$ 150              | \$ 150              | \$ 150              |
| Knox Room          | 352     | \$ 250               | \$ 150              | \$ 150              | \$ 150              |
| Dickinson Room     | 308     | \$ 250               | \$ 150              | \$ 150              | \$ 150              |
| Monroe Room        | 308     | \$ 250               | \$ 150              | \$ 150              | \$ 150              |

➤ Function Room Rental Fees do not apply to CMPs, DMPs.